JUL 2 9 2014

United States Court of Appeals District of Columbia Circuit

DISTRICT OF COLUMBIA CIRCUIT

333 Constitution Avenue, NW Washington, DC 20001-2866 Phone: 202-216-7000 | Facsimile: 202-219-8530

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Gregory Slate

V.

Public Defender Service for DC, et al.

USDC No. 13-cv-00798

USCA No. 14-7064

MOTION FOR LEAVE TO PROCEED ON APPEAL IN FORMA PAUPERIS

, Gregory Slate	, declare that I am the
of this motion to proceed therefor, I state that beca	O appellee/respondent in the above-entitled proceeding. In support on appeal without being required to prepay fees, costs or give security use of my poverty I am unable to prepay the costs of said proceeding or. My affidavit or sworn statement is attached.
	relief. The issues that I desire to present on appeal/review are as ment of the issues you will present to the court. Attach an additional
	dge Howell's order dismissing this case and determination that defendant's e crotch at work was merely a "schoolyard trick" or "tease" that does not loyment action.
Signature	
Name of <i>Pro Se</i> Litigant	Gregory Slate
Address <u>Post Office</u>	Box 21020, Washington, DC 20009

Submit original with a certificate of service to:

Clerk of Court
United States Court of Appeals
for the District of Columbia Circuit
E. Barrett Prettyman U.S. Courthouse, Room 5523
333 Constitution Avenue, N.W.
Washington, DC 20001

1. For both you and your spouse estimate the average amount of money received from each of the following sources during the past 12 months. Adjust any amount that was received weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate. Use gross amounts, that is, amounts before any deductions for taxes or otherwise.

Income source	amount	e monthly during the 2 months	Amount expected next month		
	You	Spouse	You	Spouse	
Employment	0	0	0	0	
Self-employment	0	0	0	0	
	You	Spouse	You	Spouse	
Income from real property (such as rental income)	\$700	0	\$700	0	
Interest and dividends	0	0	0	0	
Gifts	0	0	0	0	
Alimony	0	0	0	0	
Child support	0	0	0	0	
Retirement (such as social security, pensions, annuities, insurance	0	0	0	0	
Disability (such as social security, insurance payments)	0	0	0	0	
Unemployment payments	0	0	0	0	
Public-assistance (such as welfare)	0	0	0	0	
Other (specify):	0	0	0	0	
Total monthly income:	\$700	0	0	0	

Employer	Address	Dates of employm	nent Gross monthly pay
N/A			
	ise's employment histor by is before taxes or othe	y for the past two years, redeductions.)	most recent employer first.
Employer	Address	Dates of employm	nent Gross monthly pay
N/A			
4. How much cas	h do you and your spous	se have? \$20.00	
		e have in bank accounts or	in any other financial
nstitution.			,
Financial Institutio	n Type of Acco	ount Amount you ha	ave Amount your spouse ha
Justice Federal Cre	edit U. Checking	\$3.09	
Chares Schwab Ba	ank Checking	\$218.59	
all receipts, ex institutional acc been in multiple i	penditures, and bal- ounts. If you have in nstitutions, attach one and their values, which y	peal a judgment in a cive by the appropriate instances during the last multiple accounts, perhacertified statement of each own or your spouse own	six months in your aps because you have th account.
all receipts, ex institutional acco been in multiple i 5. List the assets, a	penditures, and bal- ounts. If you have in nstitutions, attach one and their values, which y	ances during the last multiple accounts, perhocertified statement of each output of each of the country of the	six months in your aps because you have th account.
all receipts, ex institutional acco been in multiple i 5. List the assets, a ordinary household	penditures, and bal- ounts. If you have in nstitutions, attach one and their values, which you	ances during the last multiple accounts, perhocertified statement of each output of each of the country of the	six months in your aps because you have the account. The second is the
all receipts, exinstitutional accordance in multiple in the assets, and accordinary household. Home (Value)	penditures, and bala ounts. If you have in nstitutions, attach one and their values, which you furnishings. Other real estate(Valu	ances during the last multiple accounts, perhacertified statement of each ou own or your spouse own and the last multiple accounts of each of the last multiple accounts on the last multiple accounts, perhacer on the last multiple accounts, perhacer on the last multiple accounts on the last multiple accounts, perhacer on the last multiple accounts on the last mult	six months in your aps because you have the account. as. Do not list clothing and (Value)
all receipts, ex nstitutional according to multiple in multiple in the assets, a profinary household Home (Value) \$25,000.00	penditures, and bala ounts. If you have institutions, attach one and their values, which y furnishings. Other real estate(Valu	ances during the last multiple accounts, perhacertified statement of each ou own or your spouse own e) Motor Vehicle #1 Make & Year:	six months in your aps because you have the account. as. Do not list clothing and (Value)
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all receipts, ex nstitutional accorden in multiple is 5. List the assets, a ordinary household Home (Value) \$25,000.00	penditures, and ballounts. If you have institutions, attach one and their values, which you furnishings. Other real estate(Values, \$5,000 \$5,000	ances during the last multiple accounts, perh certified statement of eac ou own or your spouse owr e) Motor Vehicle #1 Make & Year: Model: Registration #:	six months in your aps because you have the account. as. Do not list clothing and (Value)

USCA Case #14-7064 Docu 6. State every person, business, amount owed.	ument #. or orgai						7/29/2014 spouse mo	•	
Person owing you or your spouse money		Amount owed to you				Amount owed to your spouse			
	<u></u>			-					
				_					
7. State every person, business, or the nature of the indebtedness, and	organiz	atior ount	to who	om yo	u or	your s	spouse owes	s money,	
Person to whom you or your spouse owe money			of indeb gage, c			ı	Amo by you	ount owed I by spous	е
Great Lakes	Stude	nt Lo	ans				\$52,397.63	3	
Chase	Credit	Car	<u>d</u>		8	_	\$1,100		
Barclays	Credit	Credit Card					\$300		
AMEX	Credit	Carc	I		ň	-	\$500		
8. State the persons who rely on y Name [or, if under 18, initials on	ly]	·			pport			Age	
9. Estimate the average monthly examounts paid by your spouse. Adju quarterly, semiannually, or annually	st any pa	ayme	ents tha	t are	made		kly, biweekly		
Rent or home-mortgage payment (include lot rented for mobile home)	\$25	50.00		-				
Are real-estate taxes included?		0	Yes	•	No				
Is property insurance included?		0	Yes	•	No				
			You			Spo	use		
Utilities (electricity, heating fuel, water, sewer, and telephone)		\$20	0.00						
Home maintenance (repairs and upkeep)			\$200.00						

Filed: 07/29/2014 Page 5 of 7

	You	Spouse
Food	\$100	
Clothing	\$100	
Laundry and dry-cleaning	\$50	
Medical and dental expenses	\$250	
Transportation (not including motor vehicle payments)	\$100	
Recreation, entertainment, newspapers, magazines, etc.		-
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's		
Life		-
Health		
Motor Vehicle		
Other:		•
Taxes (not deducted from wages or included in mortgage payments)	\$300	********
(specify)		
Installment payments	<u> </u>	**************************************
Motor Vehicle		
Credit card (name):		
Department store		
(name):		
Other:		
Alimony, maintenance, and support paid to others		
Regular expenses for operation of business, profession, or farm (attach detailed statement)		
Other(specify):	4844	
Total monthly expenses:	\$1,650	

Filed: 07/29/2014

10. Do you expect any major changes to your monthly income or expenses or in your assets or liabilities during the next 12 months? ○ Yes ● No
If yes, describe on an attached sheet.
11. Have you paid-or will you be paying-an attorney any money for services in connection with this case, including the completion of this form? Yes No If yes, how much?
If yes, state the attorney's name, address, and telephone number:
12. Have you paid-or will you be paying-anyone other than an attorney (such as a paralegal or a typist) any money for services in connection with this case, including the completion of this form?
If yes, how much?
If yes, state the person's name, address, and telephone number:
13. Provide any other information that will help explain why you cannot pay the docket fees for your appeal.
See attached supplemental financial information.
14. State the city and state of your legal residence.
Baltimore, MD
Your daytime phone number: (202) 907-7526
Your age: 31 Your years of schooling: 20
Last four digits of your social-security number: 3534

Filed: 07/29/2014

Supplemental Financial Information

My real estate holding are:

- 1. 1832 West Fayette Street, Baltimore Maryland. My disabled mother and two brothers live in this house. I paid \$3,360 for the property in 2004. The state of Maryland currently values the property at \$3,000.
- 2. 431 South Smallwood Street, Baltimore, Maryland. This unit is vacant.
- 3. 7401 18th Ave, Hyattsville, MD. This unit is currently occupied by tenants but they have not paid rent in months.
- 4. 1824 North Chapel Street, Baltimore, MD. This unit is a gutted row house with no plumbing or electricity. The State of Maryland currently values the property at \$15,000 but I believe its value is much less because I have not been able to sell it for \$5,000.
- 5. 1424 North Gay Street, Baltimore, MD. This unit is vacant. The roof and back wall have collapsed.

 Maryland values the property at \$3,000 but I believe that it does not have any value because of its condition.

I have made up the deficit in my living expenses through occasional gifts from my step-father.